

Attachment A

STATEMENT OF FINANCIAL CONDITIONS AND
CREDIT WORTHINESS QUALIFICATIONS

The following information will be used to assess the applicant's creditworthiness.

A. Company Information

Type of Business

- ☐ Corporation
- ☐ Limited Liability Company
- ☐ Joint Venture
- ☐ Other (describe)

Applicant Organization

Legal Corporate Name:
Street Address:
City, State, Zip Code:
Dun & Bradstreet Number:
Federal Tax ID Number:

Applicant Credit Contact Name

Name:
Title:
Phone Number:
Email Address:

For Corporation/Limited Liability Companies

Date and State of Incorporation/Registration:
Registered Agent name:
Street Address:
City, State, Zip Code:

For Limited Partnerships

Name of General Partner:
Address of General Partner/Registered Agent:
City, State, Zip Code:

B. Basis for Evaluation of Credit

This evaluation of credit is to be based on the credit worthiness of the Offeror or its parent company as indicated below:

- ☐ The Offeror listed under section A.
- ☐ The parent company listed below.

Parent Guarantor Company

Legal Corporate Name:
Street Address:
City, State, Zip Code:
Dun & Bradstreet Number:
Federal Tax ID Number:

C. Credit Information

The entity indicated in section B is required to submit the most recent 2 years of financial statements audited by a firm of certified public accountants of national standing. Indicate below what statements are being submitted.

- ☐ Annual Report
- ☐ 10K
- ☐ 10Q
- ☐ Other (describe)

In the event the above information is inadequate to appropriately assess the entity's creditworthiness, the entity must provide evidence of its capability to provide collateral instruments, its capability to borrow and other sources of liquidity.

All submitted information must be in the English language, and financial data denominated in United States currency, and conform to generally accepted accounting principles (GAAP) in the United States. If the offering entity's financial information is consolidated with other entities, then it is the offering entity's responsibility to extract and submit as separate documents all data and information related solely to the offering entity. This must include all financial information, associated notes and all other information that would comprise a full financial report conforming to GAAP.

Has the offering entity or predecessor company declared bankruptcy in the last 5 years?

- ☐ Yes
- ☐ No

Are there any pending bankruptcies or other similar state or federal proceedings, outstanding judgments or pending claims or lawsuits that could affect the solvency of the offering entity?

____ Yes
____ No

If the answer is "Yes" to either of the above questions, please provide an addendum to this application describing the situation and how it affects the offering entity's ability to meet or not to meet its credit obligations.

Offering Entity's Credit Rating

Standard & Poor's

Last Rating Date:

Senior Unsecured Long term Debt Rating:

Moody's

Last Rating Date:

Senior Unsecured Long term Debt Rating:

Fitch

Last Rating Date:

Senior Unsecured Long term Debt Rating:

Along with the above information, attach the latest review from each of the agencies.

D. Bank Reference Information

Bank Name:

Street Address:

City, State, Zip Code:

Contact Name:

Phone Number:

Fax Number:

Account Number:

Revolving Credit Facility? ____ Yes ____ No

If Yes,

Amount of Facility: \$

Expiration Date:

E. Authorization

The Offering Entity hereby represents and warrants that all statements and representations made herein, including any supporting documents, are true to the best of Offering Entity's knowledge and belief. The undersigned authorized official of the Offering Entity warrants that the Offering Entity agrees to be bound by these representations. The Offering Entity authorizes the above listed entities to release data requested by Western Area Power Administration necessary to perform a credit check in connection with Offering Entity's interest to bid on this Power RFP.

Offering Entity's Company Name: _____

Signature of Authorized Official: _____

Name of Authorized Official (print): _____

Title of Authorized Official (print): _____

Date Signed: _____